PTO/SB/06 (08-0;
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED				NUMB	NUMBER EXTRA		RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))									s	OR		\$
TOT	AL CLAIMS CFR 1.16(c))			minus 20				x \$ =			x \$ =	<u> </u>
INDEPENDENT CLAIMS								x \$=		OR	X \$=	
(37 CFR 1.16(b)) minus 3 = •					= •			× \$=		OR	X \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II												
(Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR		R THAN ENTITY	
AMENDMENT A		REMA	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total (37 CFR 1.16(c))	•		Minus	••	=		x \$=		OR	x \$=	
EN	Independent (37 CFR 1.16(b))	•		Minus	***	=		x \$ =		OR	x \$ =	
AM	FIRST PRESENT	TATION OF	MULTIPLE	E DEPEND	ENT CLAIM (37 CF	FR 1.16(d))		+ \$ =	·	OR	+s =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Colun	nn 1)		(Column 2)	(Column 3)				•	'	
ENT B		CLA REMA AFT AMEND	INING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	. 2	6,	Minus	26			x \$=		OR	x \$=	
AMENDM	Independent (37 CFR 1.16(b))	•	4	Minus	4	=		× \$=		OR	x \$=	
8	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$ =		OR	+ \$ =	
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Colum			(Column 2)	(Column 3)						·
AMENDMENT C		CLA REMAI AFT AMEND	INING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	=		× \$=		OR	x \$=	
NEN I	Independent (37 CFR 1.16(b))	*		Minus	•••	=		x \$=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
•	If the entry in co	olumn 1 is	less than	the entry	in column 2, writ	e "O" in column 1	3	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.